

Central Iowa Community Services Management Plan Policies and Procedures Summary Update 1/23/17

- Page 1: CICS Logo update.
- Page 3: Table of Contents will be updated once changes are accepted.
- Page 4: Introduction and Vision section added brain injuries to population group served.
- Page 5: Updated office phone number and website information for Hardin, Marshall, and Warren County.
- Page 7: Updated Hardin County office phone number.
- Page 8: Removed Iowa Plan section.
- Page 9: Removed (Under Development) in Judicial and Criminal Justice System section; Transitioning Youth to the Adult System, removed wording regarding transition checklist available in the forms section of the Policies and Procedures Manual.
- Page 11: Amended Contracting section, removed Contracting/Rate Setting (CRS) Committee.
- Page 12: Amended the contracted rates information, removed rates shall be established by provider cost report and identified rates may be based on rates established by the State of Iowa through HCBS Waiver or Habilitation Services. Rates for other services set by CICS region shall be substantiated by written financial documentation. Removed CRS committee and contracted providers shall not accept rates lower than another contracted with CICS from any other region or county.
- Page 13: Exception to Policy, amended CICS Administrative Team to Coordination Officer and CEO having responsibility to review the exception to policy and provide a response.
- Page 16: For Resource guidelines added statement regarding CICS exempting one vehicle per adult household member. Co-payment for services, removed co-payments for financial liability for attorney fees related to commitment.
- Page 17 18: Assistance to Other than Core Populations, added Iowa Administrative Code 441-24.1 (225C) for developmental disability other than an intellectual disability and added brain injury as defined in Iowa Administrative Code 83.81. Added information for "Persons with brain injury" as identified in Iowa Code 83.81 and listed diagnoses.
- Page 19: Initial Needs Identification and Service Coordination section amended social workers to Service Coordinators. Service Authorization Request for Services identified 10 day time frame for Notice of Decision to be completed upon receipt of a Funding Application. Identified pending as possible NOD determination.
- Page 20: Removed Service Funding Authorization Notice of Decision as this duplicates Service Authorization Request for Services section. Removed Targeted Case Manager and identified when involved Service Coordinators shall invite providers to participate in the development of the consumer's Individual Service Plan rather than Individual Comprehensive Plan.
- Page 22: Removed CRS Committee in the Provider Network Formation and Management section.
- Page 23: Amended the Contracting/Rate Setting Structure, removed the CRS Committee and identified Operations Officer is responsible for contracting process.
- Page 24: Rate Setting Terms is amended and identifies how rates may be established. Designation of Targeted Case Management Providers, amended this section to identify with the implementation of Managed Care Organizations, case management rests with the MCOs. Any request for case management services will be referred to the proper Managed Care Organization.



- Page 27: Request for Proposal section removed the word core as a RFP could be considered to expand any service in CICS region.
- Page 28: Amended Waiting List Criteria to population for non-core and population for core.
- Page 29: Amended Access Points.
- Page 31-42: Attachment C amended for Brain Injury and restructured the chart to align with current regional budget structure.
- Page 44: Attachment E Amended the Provider Appeals section removing CRS committee and added Operations Officer. Adjusted the number of steps to the appeal process.
- Page 45: Spelling correction.